

X-eHealth

Exchanging Electronic Health Records in a common framework

Overview

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What is x-eHealth project?



Exchanging Electronic Health Records in a common framework



Citizens' secure access to their health data, also across borders



Personalised medicine through shared European data infrastructure



Citizen empowerment with digital tools for user feedback and person-centred care







X-eHealth



Project Scope

X-eHealth's purpose is to develop the foundations for a common framework for **medical imaging, discharge letters, laboratory orders and results and rare diseases** to flow both alongside citizens care pathway and across health entities between EU Member States and neighbour countries.





Key facts

European Commission funded project

- 36 consortium partners
- 5 collaborative partners
- 6 eHealth skilled experts
- Policy and political actors mixed with national competent authorities

• Webpage

- https://www.x-ehealth.eu/
- Project schedule: 2 years
 - Start: September 2020
 - End: End of August 2022

About to be extended until end of Nov 2022!

• X-eHealth "nature"

• Between a (public health) policy intervention and a research project



Project objectives

- Contribute to the Digital Single Market Strategy of the European Commission
- Lay the foundations to advance the integration process of the eHealth services features into the already in place European Cross Border Patient Summary
 - eHealth Digital Service Infrastructure (eHDSI)

European Health Data Space

- The key goals are to:
 - Improve the healthcare quality and safety for citizens by allowing them to access and manage their electronic health record from any place in the EU;
 - Contribute to standardisation and harmonisation of eHealth services in the EU by setting European agreements on diverse levels of interoperability;
 - Contribute to defragmentation of European services;
 - Facilitate interaction between patients and healthcare providers, to support prevention and citizen empowerment.



Specific objectives

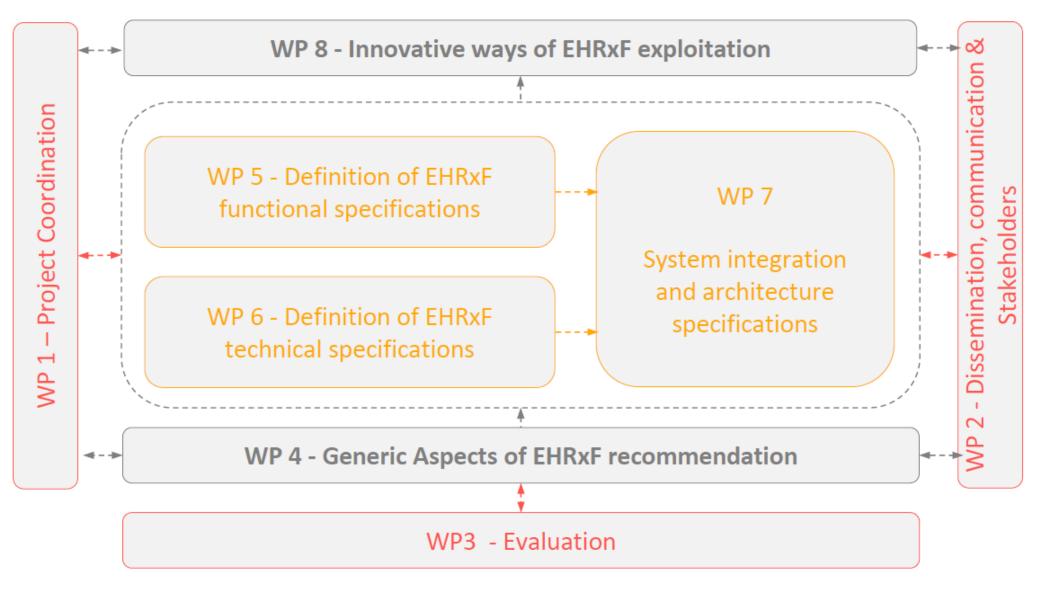
- To reach a common understanding in the EU on the efforts needed to adopt the commonly defined EEHRxF specifications at different levels and within their national EHR solutions
- To define, specify and demonstrate the EEHRxF use cases:
 - laboratory results
 - medical imaging and reports
 - hospital discharge reports
 - patient summary for those suffering from rare disease and/or comorbidities



- To submit the outcomes and recommendations of X-eHealth regarding EEHRxF deployment to the relevant bodies on policy, strategic and operational level
 - e.g. eHealth Network, National Competence Centres for eHealth, eHDSI operators
- To propose a **governance framework** for the sustainable maintenance, evolution and distribution of standardisation and interoperability

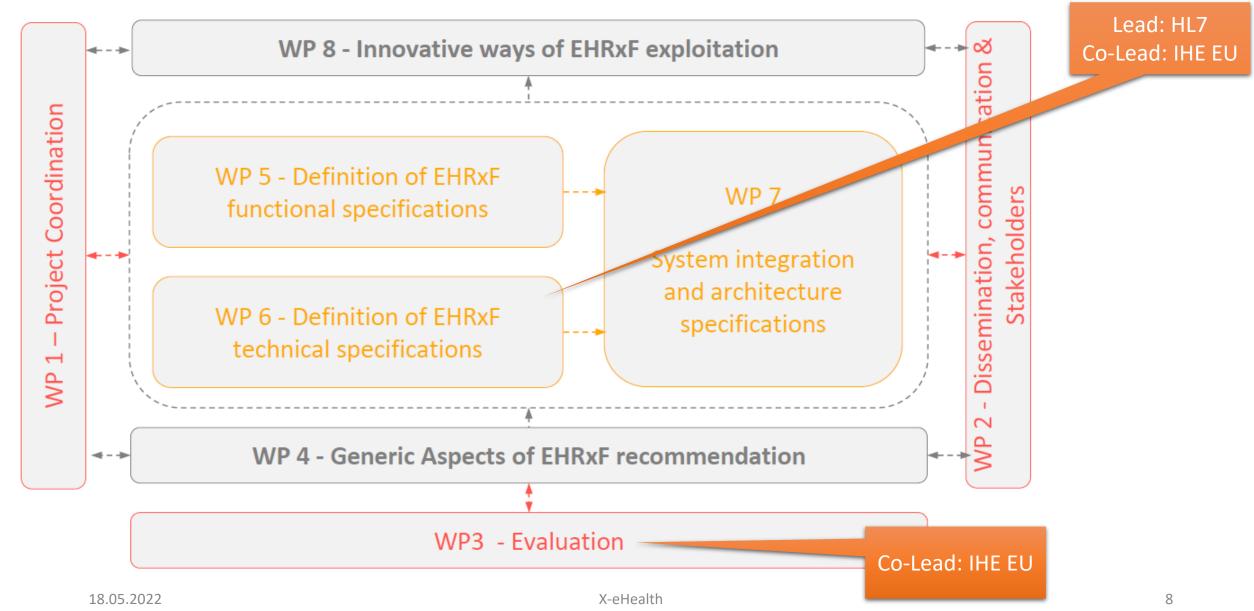


XeH Work packages



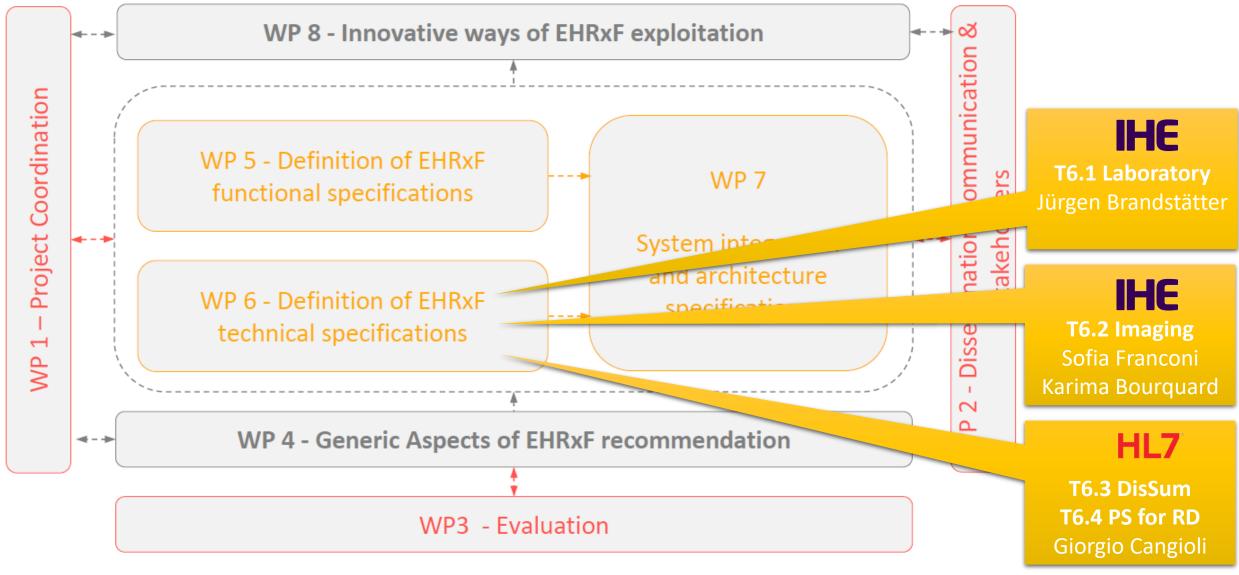


XeH Work packages





XeH Work packages





Deliverables

- D6.1 X-eHealth Services Specifications. Service (e.g. transport services) technical specifications for the domain and use cases selected
- D6.2 X-eHealth Testing Tools. A set of testing tools for content and technical specifications that include test scripts
- D6.3 X-eHealth Implementation Guide. Implementation Guide collecting harmonized and updated content technical specifications and associated artefacts initially specified



HL7

IHE



Outcomes WP6

- Specifications for ...
 - Laboratory Result Report
 - Diagnostic Imaging
 - Hospital Discharge Summary—
 - Patient Summary for rare diseases
- Specifications in 2 Standards
 - Primary: CDA
 - Secondary: FHIR (if time and budget allows)
- X-eHealth Tools
 - CDA: Art-Decor
 - <u>https://art-decor.org/art-decor/decor-project--eehrxf-</u>
 - FHIR: GitHub, FHIR IG Publisher
 - https://build.fhir.org/ig/hl7-eu/x-ehealth/artifacts.html

CDA: IHE XD-LAB

FHIR: Diagnostic Report Resource

CDA: DICOM PS3.20, IHE MRRT FHIR: Diagnostic Report Resource

> CDA: IPS, EU PS, IHE PCC DisSum, C-CDA DisSum FHIR: IPS (HL7 + IHE profile), C-CDA on FHIR

> > CDA: IPS (HL7 + IHE profile), EU PS FHIR: IPS (HL7 + IHE profile)

Deferred to follow-up project



Laboratory Result Report



Health g Electronic Health Records on framework Clinical / Business Needs

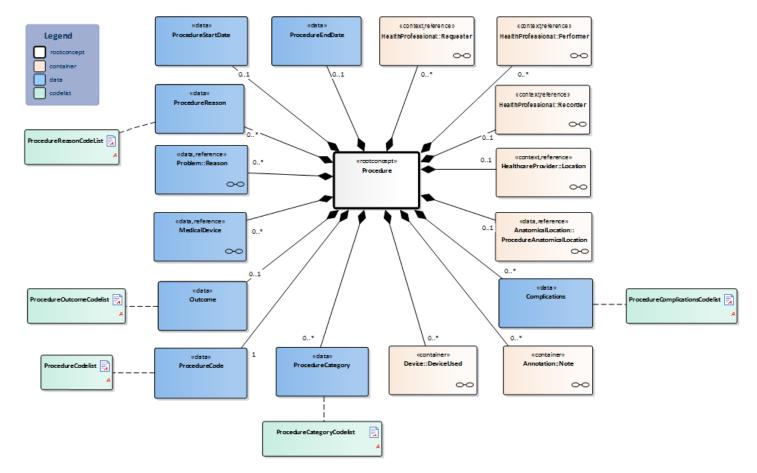
- Laboratory is an essential domain for diagnostics and clinical decision making.
- Main cross boarder laboratory use cases:
 - Laboratory test order
 - Lab test order could be sent to laboratory in another country (e.g., to referential laboratory)
 - Sharing laboratory test result report
 - Lab results could be delivered to ordering party from another country
 - Lab results from country A could be delivered to a point of care in country B on request

Sharing of lab test results is essential for continuity of care in X-border situations



X-eHealth Exchanging Electronic Health Records in a common framework Clinical / Business Needs

- Lab functional specifications (T5.3)
 - Include all interoperability layers according to the ReEIF
- LRR Information Model
- Innovations:
 - Harmonization of Terminologies (e.g., Study Types, ...)
 - Concept for Search & Filter (Metadata)
 - Cooperation and co-creation with Standards Development **Organizations**





• Excellent cooperation between IHE and HL7 in WP6

- Close and friendly cooperation
- Common goal: provide best-possible outcome

Tight contact with WP5 "Functional requirements"

- WP6 tries to hold on functional requirements
- WP5 acknowledges feedback out of "implementation practice" and standards

Feedback look to SDO community

• E.g. Laboratory: Requirements not covered by XD-LAB will not be simply specified, but discussed with IHE PALM



The coding systems

Observation codes

- Nomenclature for properties and units (NPU)
 - IFCC and IUPAC
- Logical observation identifier names and codes (LOINC)
 - Regenstrief institute
- SNOMED CT
 - SNOMED International
- Other Code system standardization, e.g.
 - Study Types (e.g. Hematology studies)
 - Result values (e.g. negative, positive, bacteria found)
 - Specimen types (capillary sample, venous EDTA blood)
 - Methods (e.g. POCT or hospital lab method)

Mapping not trivial



Use of conventional test names

Example of conventional test names used for Leukocyte count

B-Leukocyter (sv) B_Leukocyty (cs) White blood count (en) Leukocyte count (en) WBC (en) Leukozyten (de) Λευκοκύτταρα (el)

Might lead to missunderstanding and serious mistakes!

Standard English test names

NPU: B—Leucocytes;num.conc. LOINC: WBC (Bld) [#/Vol]

Standard test names in local language

(sv) NPU: Leukocyter (B; num. konc. [10^9/l] *)
(cs) NPU: Leukocyty (B; num. konc. [10^9/l] *)
(nl) LOINC: leukocyten:aantal/volume
(es) LOINC: Leucocitos:Concentración de número

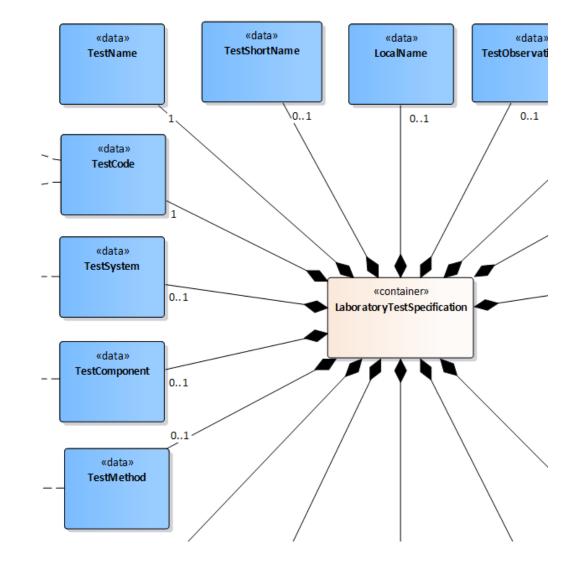
Might not be understood by physicians trained for conventional test names



Use of conventional test names

Example of conventional test names used for Leukocyte count

B-Leukocyter (sv) B_Leukocyty (cs) White blood count (en) Leukocyte count (en) WBC (en) Leukozyten (de) Λευκοκύτταρα (el)



Might lead to missunderstanding and serious mistakes!



Example of different units used for Leukocyte count

Leukocyte count = $12.0 \times 100/\mu$ L Leukocyte count = $13 \times 10^{6}/mm^{3}$ Leucocyte count = $140\ 000/mm^{3}$ Leucocyte count = $20 \times 10^{9}/L$ Leucocyte count = $25 \times 10^{3}(/mm^{3})$ Leucocyte count = $12\ 000 \times 10^{3}/mL$ Luecocyte count = $1.2 \times 1/nL$ Leucocyte count = $18 \times 10E9/L$

Example of different units used for CRP

CRP = 50 mg/L

CRP = 7 mg/dL

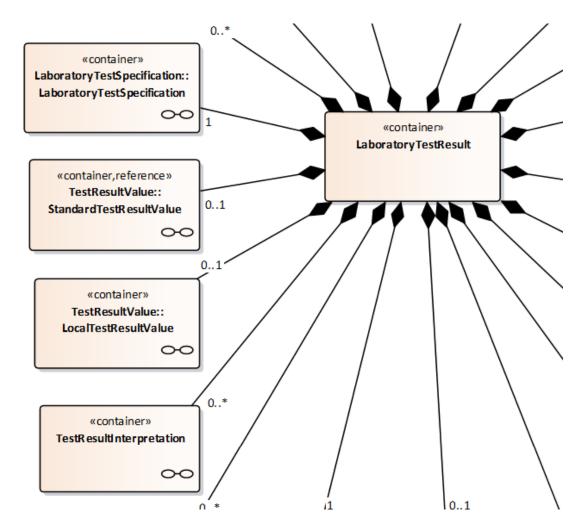
Might lead to serious mistakes!



Different result units used for the same test

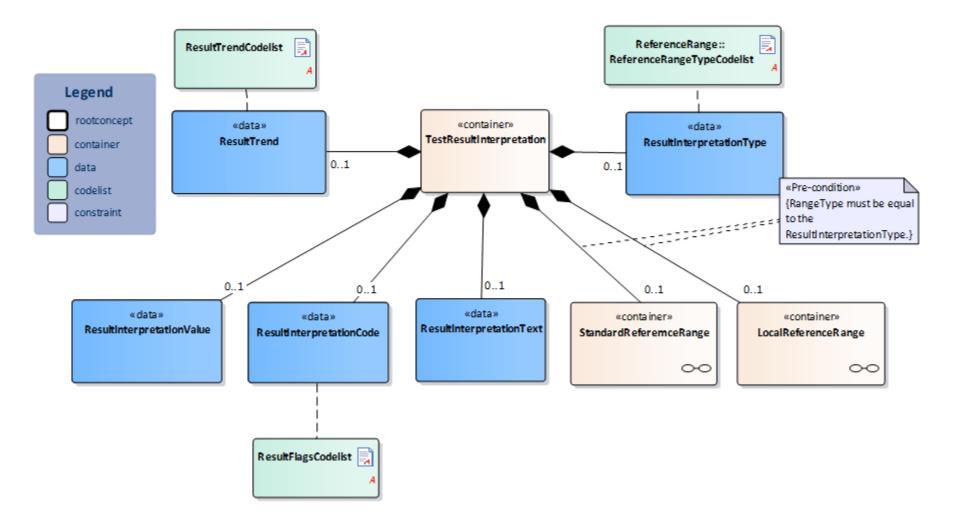
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Result interpretation





Administrative data standardisation

X-eHealth Lab Report Header constraints (from X-eHealth project) International Standards IHE XD-LAB constraints (from international standards) International Standards X-eHealth CDA Generic Header constraints (from X-eHealth project) EU wide harmonization



Example of well-formed laboratory report Header



Laboratory of immunology Center of immunology and mikrobiology

Address tel.: phone no.

www.page.cz, email: imunology@domain.cz

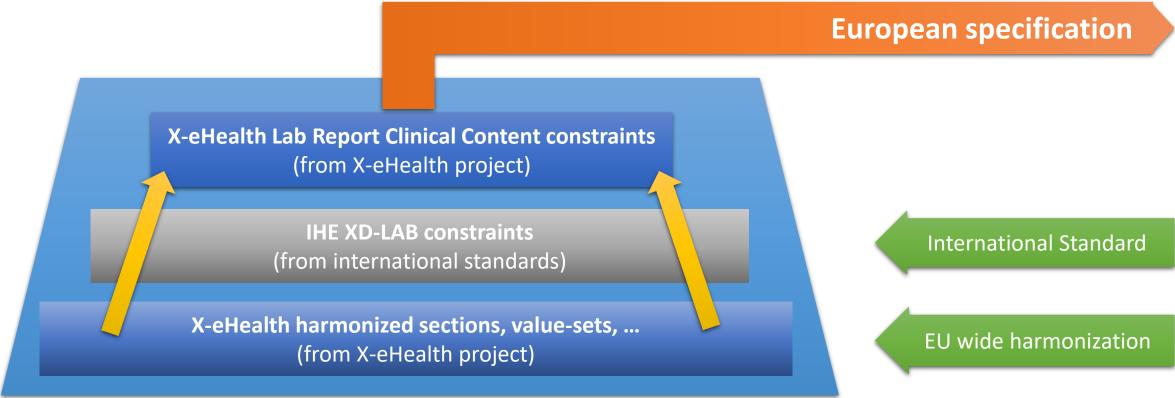


M 8065

Name:	Patient Nar	ne		HCP organization: Sample Hospital, surgical department			
ID:	121212121			HCP name	: John Physician		
Age:	96			HCP org. ID	:	Specialty: 001	
Diagnosis:	A01	HIH No:111					
Received: 4.6.2009 9:19:00			Submitted: 1	12.6.2009 7:24:00 Printed: 12.6.2009 7:44:30		2009 7:44:36	



Clinical lab content standardisation





Example of well-formed laboratory report Body

	Test	4.6.2009 7:00	Result graphical	Ref. range	Units	Test group or panel		
	Humoral immunity		assessment					
	»IgG	10,40	N *	7,00 - 16,00	g/l			
	»IgA	1,17	*	0,70 - 4,00	g/l			
	»IgM	1,11	*	0,30 - 2,40	g/l			
1 1º 4º 6	»C-reactive protein	< 3,19	*	< 5,00	mg/l			
Indication of	»C3-complement	1,09	*	0,75 - 1,40	g/l	Test group		
accredited test	»C4-complement	0,22	*	0,10 - 0,34	g/l	or panel		
	Infection immunity							
	ASLO	1590	*	0 - 240	IU/ml 🚽			
	»HSV 1+2 IgG	4,60	*	0,00 - 1,00	index	Indication o results out		
	»HSV 1+2 IgM	0,50	*	0,00 - 1,10	index	of range		
	Anamnestic levels of antibodies against HSV 1+2							
	»CMV IgG	57,4	*	< 30,0	AU/ml			
	»CMV IgM	0,17	*	< 0,50	index	Reference range with		
Inline textual	Anamnestic levels of antibodies against CMV							
interpretatio	»EBV-VCA IgM	0,06	*	< 1,05	index	High value only		
n of result	»EBV-EA (D) IgG	0,00	*	< 1,05	index			
	»EBV-VCA IgG	2,31	*	< 1,05	index			
	»EBNA-1 IgG	3,30	*	< 1,10	index			
	EBV comment	anamnestic titter		,				
	Autoimmunity							
	»ANA G,A,M	nuclear matrix				_		
	»ANA G,A,M	80	*	0 - 160	titr			
	Total IgE			0 100				
	»Total IgE	164,0	*	< 150,0	kU/I			
	5	10 1,0			-1			
	li-13798, Pp-13798							
	4.6.2009 7:00:00	<u>`</u>						
Result report end note 2	The result should be evaluated A list of accredited examinations For information on collection pro	(») is available on www.imunol-	usti.cz nd an overview of laboratory	tests, refer to the		Result report en note 1		

X-eHealth



IHE XD-LAB Profile Clinical Content

One to many "Laboratory Study Type" section(s):

Laboratory Study Type section e.g. "HEMATOLOGY STUDIES"

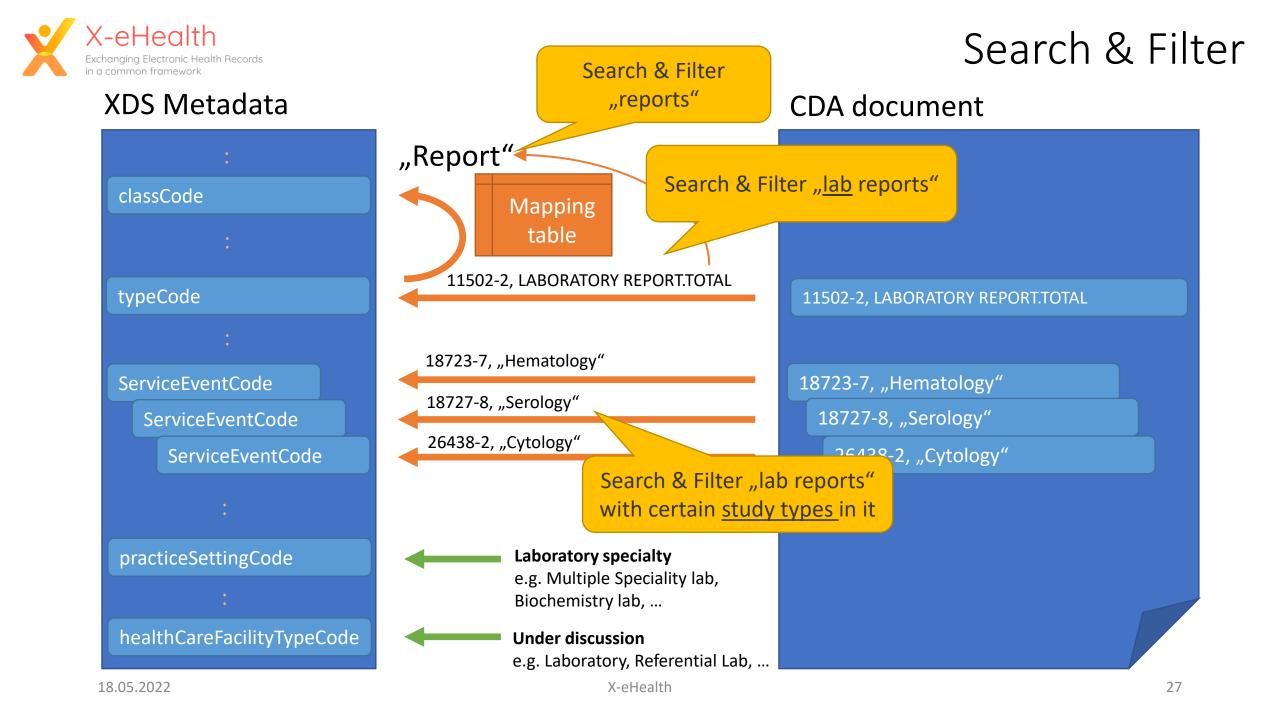
Laboratory Study Type section e.g. "CYTOLOGY STUDIES"

Innovation: The harmonization and agreement on that list of **Study Types** is a main outcome

Lab report - Clinical Document

CDA Header

CDA Body





Implementation Guides

Art-Decor based Publicly available Free of charge

Link to specifications: Lab Report IG



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X-eHealth - Templates							ol 🔍 🖉 🖅 💷	ART DEC		
Q (a) Project	Datasets	Scenarios	Terminology	Templates	Issues			Login		
plates										
2 7 4	XeH Laboratory	Result Report	- ©					1 1		
Q	History (4)									
A Document Level Template										
SXeH Clinical Document				1.113883.2.51.10.33 ref eehrxf-			Effective Date 2021-10-01 11:41:22 Version Label 0.1	2		
XeH Diagnostic Imaging Report (0.1)		Status Oraft						lt Dement		
XeH Hospital Discharge Report (0.1)		Name XeHLabRepor					Display Name XeH Laboratory Resu	it Report		
XeH Laboratory Result Report (0.1)	Description									
XeH RD Patient Summary (0.1)	Context	Context Pathname /								
Header Level Template Section Level Template	Classification									
Entry Level Template		Open/Closed Open (other than det								
late type not specified	Used by / Uses	b Used by 0 transactions and 0 templates, Uses 14				14 ten	nplates			
	Relationship		Adaptation: te	emplate <u>1.3.6.1.4.1</u>	.19376.1.3.3 Sha	ring La	boratory Reports (XD-LAB) Content Module (2016-07-05) 📧 XDLAB-			
	Expand All Collapse All Search by name									
	Item			DT	Card	Conf	Description	Label		
		<pre>v h17:ClinicalDocument</pre>						XeHL-por		
	▶ h17:realm	nCođe		<u>CS</u>	0 1		This element SHOULD be present and is valued from the RealmOfUs [2.16.840.1.113883.1.11.11050] subset, within the VocabularyDomainQualifier value set. In the international context of this profile used as it is without any further extension, the realm code SHALL be <realmcode code="UV"></realmcode> (universal). Whenever a national extension has been defined and is used, the realm code SHALL identify this national extension.			
	▶ h17:type]	▶ h17:typeId		Ш	1 1	М	This element is a technology-neutral explicit reference to the standard CDA R2. It SHALL be present and valued as follows: ClinicalDocument/typeId@orot = "2.16.840.1.113883.1.3" (which is the OID for HL7 Registered models); ClinicalDocument.typeId@extension = "POCD_HD000040" (which is the unique identifier for the CDA, Release Two Hierarchical Description).			
	▶ h17:templ	h17:templateId		Ш	1 1	Μ	This element is identifying the set of constraints applied to the CDA R2 standard by this specification of a laboratory report.	XeHL-por		
	h17:templ	hl7:templateId		Ш	0 *		This element is identifying the set of constraints applied to the CDA R2 standard by this specification of a laboratory report.	XeHL-port		
	▶ hl7:id			Ш	1 1	М	ClinicalDocument/Id SHALL be present. It represents the unique instance identifier of the clinical document. The combination of the root and extension attributes SHALL provide a globally unique identifier, in accordance with CDA R2, without further constraints.	XeHL-por		
	▶ h17:code			<u>CE</u>	1 1	М	ClinicalDocument/code SHALL be present. The laboratory report car be either a multi-disciplinary report or a single discipline report. Multi-disciplinary Laboratory Report: The LOINC code identifying the type of document as a (potentially) multidisciplinary laboratory report (presenting results from many	XeHL-por		



Upcoming events

X-EHEALTH

25TH MAY 2022 | 09:00 . 13:00 CET

Professional Training Sessions

DATA EXCHANGE FOR BETTER HEALTH - ACCESSING AND SHARING MEDICAL IMAGES AND DISCHARGE LETTERS ACROSS EUROPE

X-EHEALTH

https://bit.ly/3rOBLbF

INTEROPERABILITY A W A R D 2022

hackathon FOR CHRONIC DISEASE MANAGEMENT

7 · 9 JUNE 2022 · ONLINE EVENT

https://bit.ly/3vlJO21

https://bit.ly/3MxU65U





- X-eHealth Website: <u>http://www.x-ehealth.eu/</u>
- LinkedIn: https://www.linkedin.com/company/x-ehealth/
- Twitter: https://twitter.com/x ehealth



Thank you



Jürgen Brandstätter

Member, IHE International Board Executive Board, Global Consortium for eHealth Interoperability Deputy Co-chair, IHE Europe Co-chair GDC, Education

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